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PTO/SB/05 (12/97)

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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	COMP:0201	Total Pages	36
	First Named Inventor or Application Identifier			
	Stephen D. Heizer et al.			
	Express Mail Label No.	EL652336148US		

09/852981

05/10/01

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Specification Total Pages 23 <i>(preferred arrangement set forth below)</i> -Descriptive -Cross References to Related Application -Statement Regarding Fed sponsored R & D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings <i>(if filed)</i> -Detailed Description -Claim(s) -Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) <i>(35 USC 113)</i> Total Sheets 3 Total Pages 9 4. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) Unsigned b. <input type="checkbox"/> Copy from a prior application (37CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 5 below]</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 5. <input type="checkbox"/> Incorporation By Reference <i>(useable if Box 4b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		6. <input type="checkbox"/> Microfiche Computer Program <i>(Appendix)</i> 7. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(where there is an assignee)</i> 10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) 14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Other PTO-2038	
17 <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: ____/____			


18. CORRESPONDENCE ADDRESS <input type="checkbox"/> Customer Number or Bar Code Label <input type="checkbox"/> Correspondence address below <i>(Insert Customer No. or Attach bar code label here)</i>					
NAME	Diana M. Sangalli				
	Fletcher, Yoder & Van Someren				
ADDRESS	P.O. Box 692289				
CITY	Houston	STATE	Texas	ZIP CODE	77269-2289
COUNTRY	USA	TELEPHONE	(281) 970-4545	Fax	(281) 970-4503

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FEE TRANSMITTAL	Complete if Known	
	Application Number	Unassigned
	Filing Date	Herewith
	First Named Inventor	Stephen D. Heizer et al.
	Group Art Unit	
	Examiner Name	
TOTAL AMOUNT OF PAYMENT	(\$) 0.00	Attorney Docket Number COMP:0201/VAN

<p>METHOD OF PAYMENT (check one)</p> <p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number _____</p> <p>Deposit Account Name Fletcher, Yoder & Van Someren</p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p style="padding-left: 40px;"><input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p style="text-align: center;">PTO-2038</p> <p style="text-align: center;">FEE CALCULATION (fees effective 10/01/96)</p> <p>1. FILING FEE</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>710</td> <td>201</td> <td>355</td> <td>Utility filing fee</td> <td style="text-align: right;">710.00</td> </tr> <tr> <td>106</td> <td>330</td> <td>206</td> <td>165</td> <td>Design filing fee</td> <td style="text-align: right;">—</td> </tr> <tr> <td>107</td> <td>540</td> <td>207</td> <td>270</td> <td>Plant filing fee</td> <td style="text-align: right;">—</td> </tr> <tr> <td>108</td> <td>790</td> <td>208</td> <td>395</td> <td>Reissue filing fee</td> <td style="text-align: right;">—</td> </tr> <tr> <td>114</td> <td>150</td> <td>214</td> <td>75</td> <td>Provisional filing fee</td> <td style="text-align: right;">—</td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: right;">(\$) 710.00</td> </tr> </tbody> </table> <p>2. 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146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))	—																																																																																																																																																																																																																																																																																																				
149	790	249	395	For each additional invention to be examined (37 CFR 1.129(b))	—																																																																																																																																																																																																																																																																																																				
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SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	Diana M. Sangalli	Reg Number	40,798
Signature		Date	May 10, 2001
		Deposit Acct User ID	